

Email: retireselect\_clientservices@mapfunds.com.au

Post: PO Box 1282, Albury NSW 2640

# Withdrawal form - Payment or Rollover Out Request

Please complete this form in CAPITAL letters.

#### Use this form to:

- Request a payment from your account, or
- Rollover your account to another superannuation fund including SMSF.

Please use a separate form (available on the Secure Online Portal) to request a payment from your superannuation account for the following reasons:

- Severe financial hardship,
- Approved compassionate grounds (via the ATO),
- Approved Departing Australia superannuation payment (via the ATO),
- Temporary or permanent incapacity or a terminal medical condition, or
- a transfer to a Kiwi Saver account.

#### Before requesting payment, please check:

- that all of your contributions from your employer have come into your account,
- where you are claiming a personal deduction for any personal contributions made to your account, you have sent
  us an ATO Notice of intent to claim a tax deduction, available on the Secure Online Portal or via the ato.gov.au
  website,
- your insurance. Closing your account will cause your insurance to cease; a lower account balance may affect the ability for premiums to continue to be paid, and
- the *Identification requirements factsheet* for what is appropriate certified identification and how to provide it.

Arrangements for sending us your payment or rollover request (allow time for postage or transfers):

- post your original completed and signed *Withdrawal form* and clear and legible CERTIFIED copies of original documents to the fund postal address, or
- email your scanned *Withdrawal form* and scanned certified copies of original identification and any other related documents directly to the fund at <a href="mailto:super@onevue.com.au">super@onevue.com.au</a>.



Email: retireselect\_clientservices@mapfunds.com.au

Post: PO Box 1282, Albury NSW 2640

# Payment or rollover request



Completing this form in BLOCK letters ensures we have a clear instruction.

To be valid, your application for a payment or rollover must be signed and dated.

Read the Privacy Policy on the last page to see how the fund uses your information.

Member number			Date of birth (DD/MM/YYYY)	
Гitle	Given nam	e(s)		
Surname				
Residential address				
Preferred phone no		Phone (work)		Mobile (If available)
Email				
	details if the details consent and author	provided above differ to the	details currently hunications and in	und to update my address and contact neld. By providing my email address, I formation in an electronic format, via on required by law.
our tax file number (	TFN)			
			☐ I have alread	dy provided my TFN
Λ		to ask for your TFN. You do no		your TFN but if you don't, you may enc



Email: retireselect\_clientservices@mapfunds.com.au

Post: PO Box 1282, Albury NSW 2640

Identification requirements

	I have previously provided CERTIFIED photocopies of my original identification documents for my account.
	I have attached scanned or original CERTIFIED photocopies of my original identification documents to this payment of
rollover r	request.



Refer to the *Identification requirements factsheet* on the Secure Online Portal for help on suitable identification documents and how to provide your certified identification. Please do not provide original documents.

# Step 2 Confirming you are eligible to receive a payment



I understand that if I hold more than \$200 in superannuation my monies may need to be preserved, and the fund is required to confirm my eligibility to access my superannuation benefits.

#### From the six options below select the option which applies to you

	I want to make a rollover to another superannuation fund.		
	I have unrestricted non-preserved superannuation in my member account available to me.		
	I have less than \$200 in my superannuation account and have ceased gainful employment.		
	I am aged at least 65.		
	I am aged between age 60 and 64 and have ceased a gainful employment arrangement since turning age 60.		
My prev	ious employer was		
I stoppe	d working there on date (DD/MM/YYYY)		
□ I am I	between my preservation age and the age of 64, have ceased gainful employment and don't plan to work more than 10		
hours a	week again. (Refer to ato.gov.au for your preservation age)		
My prev	ious employer or circumstance was		
My date	of retirement was (DD/MM/YYYY)		



I understand to be eligible to receive a payment from my superannuation, I must meet the definition of retirement, have reached preservation age, and never intend again to be gainfully employed for more than 10 hours per week. Gainful employment can mean either being employed or self-employed to earn an income or reward in any employment, occupation or business.



Email: retireselect\_clientservices@mapfunds.com.au

Post: PO Box 1282, Albury NSW 2640

## Step 3 Providing lump sum payment details



A **FULL** lump sum payment or rollover will close my superannuation account and any insurance cover will cease. A Notice of Intent to claim a personal tax deduction must have been received by the fund and allocated in the account prior to a withdrawal being received and processed. Investment earnings (positive or negative) tax, insurance and administration fees will change the final lump sum amount paid.

Refer to the fund Product Disclosure Statement and the Additional Information Guide for terms and conditions for any disposal of investments necessary to make up your withdrawal.

Request a lump sum payment				
	Partial lump sum payment \$	(pre tax)		
	Full lump sum payment (account closure)			
Paying to	your bank account			
Payment	will be made into your bank account by electronic funds to	ransfer (EFT).		
Lump su	m payment bank account details			
	Pay my bank account details already provided			
My Austi	ralian personal bank account details (held in my name or jo	oint names with myself) are noted bel	ow	
Austral	ian Bank name	Branch		
BSB	Account number	Account name		
Internati	ional Bank account details		,	
Bank na	Bank name Bank SWIFT number Bank routing number		Bank routing number	
Step 4	Providing rollover out details			
Request	to rollover (partially or fully) to another superannuation fu	nd		
	Partial rollover out of the fund to another superannuation	n fund \$		
	Full rollover out of the fund (account closure) to another	superannuation fund		
	Partial rollover out of the fund to a self-managed superan	nuation fund (SMSF) \$		
	Full rollover out of the fund to a SMSF			
Provide details of the superannuation fund or SMSF receiving your transferred funds  Fund name  Fund address				
Fund A	BN	USI		
Electronic Service Address (ESA)*				

\*ESA is available from your SMSF messaging provider or SMSF intermediary (administrator, tax agent, accountant). For further information on ESA, visit ato.gov.au.

RetireSelect is a part of YourChoice Super, a sub plan of OneSuper ABN 43 905 581 638 RSE R1001341. The RetireSelect Product Disclosure Statement is issued by Diversa Trustees Limited ABN 49 006 421 638, AFSL No 235153 RSE Licence No L0000635 the Trustee of RetireSelect and OneSuper.



Email: retireselect\_clientservices@mapfunds.com.au

Post: PO Box 1282, Albury NSW 2640

# SMSF bank account details (provide certified copy of bank statement)

My SMSF bank account	details are noted below	,	
Australian Bank name		Branch	
BSB	Account number	Account name	
		f my SMSF and have attached a certified copy of the top of the SMSF e Checklist for further important details on rolling out to a SMSF.	
Step 5 Please read	these declarations and sign this fo	orm	
<ul><li>with my request,</li><li>I declare that I am</li><li>I have supplied cer</li></ul>	an Australian citizen, a New Zealand c	correct and I authorise the fund to process my benefit in accordance citizen or a permanent resident of Australia, and ws my correct date of birth and any name change(s) if required.	
<ul> <li>insurance held in n</li> <li>If I have not alread contributions in th</li> <li>Where direct invest Product Disclosure of investment opti request,</li> <li>I consent to my pe viewing at onesupe</li> <li>I have the right to a</li> </ul>	ny account will cease once my account ly indicated an intention to claim a tax e future once my account is closed, stiment assets are held, there may be destinent, and Additional Informations, and the minimum balance requirersonal information being used in accoer.com), and ask the fund for information on how we	penefits I may be losing such as insurance cover (if any) and that any not is closed, at deduction, I won't be able to claim a tax deduction for my withdrawn delays while your investments are sold down. I have referred to the on Guide Terms and Conditions for details on the order of redemption red to be held in the Cash Hub prior to submitting this withdrawal ordance with OneVue Wealth Services Privacy Policy (available for withdrawing my superannuation will affect my entitlements and have not, and I discharge the fund from all further liability in respect of the	
Sign here			

Date (DD/MM/YYYY)



Email: retireselect\_clientservices@mapfunds.com.au

Post: PO Box 1282, Albury NSW 2640

#### Checklist

We will process your lump sum payment or rollover request as soon as we can. Our ability to process your lump sum payment or rollover out request is dependent on:

- the application for lump sum payment or rollover out being fully completed, and all of the necessary documents being provided, and
- where you hold investments in your account, there may be delays while your investments are sold down. Please ensure there are sufficient funds, including retaining the minimum balance, in your Cash Hub prior to submitting this form.



Please refer to the Product Disclosure Statement, and Additional Information Guide Terms and Conditions for details on the order of redemption of investment options.

#### Have you

	Completed all of the form, and signed and dated the form,
	Attached a scanned clear & legible CERTIFIED copy of original identification documents, OR
	Where you intend to mail in the form and identification, attached CERTIFIED copies of original identification documents, and
	Consulted the identification requirements factsheet on providing proof of identity. The identification requirements factsheet can be found on the FAQ/Forms page of the Secure Online Portal.
f rolling	out to a SMSF
	Provided a certified copy of the SMSF bank statement? If you are completing a full or partial rollover of funds to your SMSF you will also need to ensure you are registered as a member and trustee on the Australian Taxation Office's (ATO) SMSF

### Sending your payment or rollover request form and documents to us.

Trustee/Member Register.

You can either:

- email your scanned form and clear & legible CERTIFIED copies of identification documents to super@onevue.com.au, OR
- post your original form and clear & legible CERTIFIED copies of identification documents to the fund postal address.

# **Privacy Policy**

The collection of your personal information (PI) in this form is governed by the Privacy Act 1988 (Cth). One Vue Wealth Services uses your PI to administer your superannuation account (including insurance, if any), improve our products and services and keep you informed. If we cannot collect this information, we may not be able to do these tasks. We may collect your PI from you, or from third parties such as your employer. We will only share your PI where necessary to perform our activities with our administrator, other service providers, as required by law or court/tribunal order or with your permission. Your PI may be accessed overseas by some of our service providers. For full details of how we use your PI, the countries where your PI may be accessed, how you can access and change your PI, and the privacy complaints process please read our Privacy Policy on the Secure Online Portal, or at onesuper.com.

The fund is a superannuation product within OneSuper ABN 43 905 581 638 RSE R1001341 (OneSuper). Diversa Trustees Limited ABN 49 006 421 638, AFSL 235153 RSE Licence L0000635 (referred to as the Trustee, we, our, us) is the Trustee of OneSuper and the product issuer. The information in this document has been prepared by OneVue Wealth Services Pty Ltd ABN 70 120 380 627, AFSL 308868 as the Promoter. It is intended to provide you with general information only and does not take into account your personal objectives, financial situation or needs. Before making any financial decisions about the fund, it is important that you read the current product disclosure statement (PDS) and Target Market Determinations (TMDs), consider your particular circumstances and whether the particular financial product is right for you. The current PDS and TMDs for the fund are available at onesuper.com. Each TMD sets out who an investment in the fund might be appropriate for and the circumstances that trigger a review of the TMD. You should consult a financial adviser if you require personal advice.